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CONFIRMATION NO. 3886

<b>SERIAL NUMBER</b> 10/589,621	<b>FILING OR 371(c) DATE</b> 10/06/2006 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1623	<b>ATTORNEY DOCKET NO.</b> 2503-1228
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a 371 of PCT/EP05/01458 02/14/2005

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

ITALY MI2004A000255 02/17/2004

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***  
 01/19/2007

**\*\* SMALL ENTITY \*\***

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> ITALY	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 6	<b>INDEPENDENT CLAIMS</b> 3
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <u>Examiner's Signature</u> <u>Initials</u>				

**ADDRESS**

466

**TITLE**

Use of o-atp for the treatment of diseases involving angiogenesis

<b>FILING FEE RECEIVED</b> 515	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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